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Items of Interest:

Allergy proof your home. Even the cleanest homes are often reservoirs for common allergens such as dust mites, mold, pet dander, and residue from mice or cockroaches. Changes in your home environment can decrease your exposure to such allergens and may help reduce allergy and asthma symptoms. Keeping the home at a 70 degree temperature, cleaning every week, no smoking indoors (stop smoking, period), and keeping the house free from infestations (mold, insects, etc.) can keep greatly limit your exposure to allergies. If you have pets, make certain your family pets are cleaned thoroughly and often. For those persons with serve allergies, a visit to your physician for medical assistance may also help. If you would like to learn more about allergy proofing your home, visit: www.mayoclinic.com/helath/allergy

Navy and Marine Corps Medical News

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Navy, Army Surgeons General Talk Integration at Bethesda

By Chris Walz, National Naval Medical Center Public Affairs

BETHESDA, Md. - The Army and Navy surgeons general held a town hall meeting at the National Naval Medical Center on Feb. 20 to update staff members on the integration process, answer questions and address concerns.

Under the 2005 Base Realignment and Closure (BRAC) Law, Walter Reed and Bethesda Medical Center are required to integrate into one medical facility by September 2011.

Vice Adm. Donald Arthur and Lt. Gen. Kevin Kiley conducted the town hall meeting as a follow-up to one they held at Walter Reed Army Medical Center on Dec. 4.

Arthur said neither he nor Kiley will be responsible for building the Walter Reed National Military Medical Center's reputation. That, he said, is a responsibility of the hospi-

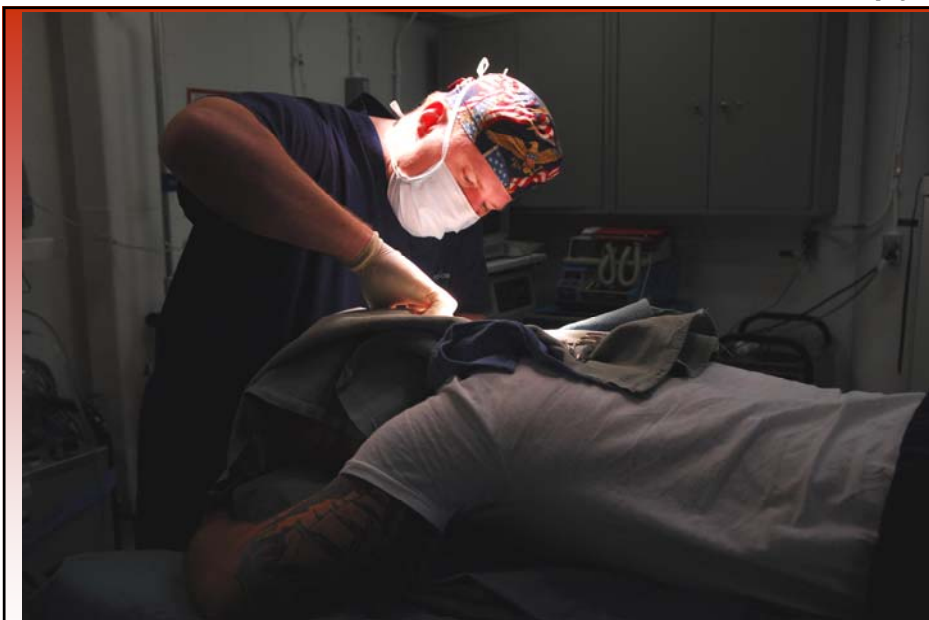
tal's staff members.

"I know the Walter Reed National Military Medical Center will have incredible excellence in health care," Arthur said. "Reputation is built every single day, with every single patient. It's not about us. It's about them -- those who come here for care."

"The National Naval Medical Center is great -- not because of where it is built, not because of its location, not because it has great Metro access or because it's close to the Beltway," Kiley said. "All of those things are a part of it -- but it's great because of the folks who work here."

Arthur said he fears people may be getting into a power-struggle over semantics. His theory proved accurate when an audience member expressed concern over some peo-

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PACIFIC OCEAN - Lt. Cmdr. John Ullrich performs cranial surgery on a crewmember aboard the nuclear-powered aircraft carrier USS Nimitz (CVN 68). Navy photo by Mass Communication Specialist Seaman Eduardo Zaragoza

NH Bremerton Recognized for Excellence in Mother-Baby Care

By Mass Communications Specialist 1st Class (SW) Fletcher Gibson, Naval Hospital Bremerton Public Affairs

BREMERTON, Wa. - Naval Hospital Bremerton's commanding officer (CO) presented her staff with the DoD Military Health System 2007 Obstetrics Satisfaction Award at a ceremony held on the hospital quarterdeck Feb. 9.

Capt. Catherine Wilson, the hospital CO, received the award herself on behalf of the hospital at the MHS 2007 Annual Conference in Washington, D.C. on January 31, but said it was her hospital team back in Bremerton, Wash. who deserved it the most.

"It made me proud to receive that award, knowing I would come back to the real ceremony and be able to give it to those that really matter," she said to the assembled staff at the hospital's ceremony.

The award singles out NHB's labor and delivery ward from all military treatment facilities in the continental U.S. But although the award is written in the name of the

hospital's obstetrics program, it really recognizes departments across the entire hospital that contribute to the success of any single ward.

"This award comes to the NH Bremerton team, not one single person or department," said Cmdr. Charles Lamb, the hospital's director for specialty services.

During the ceremony, special mention was given to all of the departments involved in the efforts that lead to the Obstetrics Satisfaction award. From the nursing staff to food services to the dentist who uses his casting equipment to make molds of tiny hands and feet, the otherwise specific award succeeded in acknowledging the team effort that goes into NHB's work environment.

All told, 27 staff members from 11 departments were called up during the ceremony to help receive the award.

The award was granted in the field of customer satisfaction and directly reflects the comfort the hospital's patients feel during ob-



BREMERTON, Wa. - Cmdr. Charles Lamb, Naval Hospital Bremerton's (NHB) director for specialty services (left), receives the Department of Defense 2007 Obstetrics Satisfaction Award from Capt. Catherine Wilson, NHB Commanding Officer. U.S. Navy Photo by Mass Communications Specialist 1st Class (SW) Fletcher Gibson

stetric care, the medical field that cares for women before, during and after child-birth.

Chaplain Corps Leadership Charts Course For Future

By Mass Communication Specialist 1st Class (SCW) L.A. Shively, Navy Office of Community Outreach Public Affairs

SAN ANTONIO, TX - Navy, Marine Corps and Coast Guard chaplains met to chart the course for the role of the Chaplain Corps in the sea services of the future at their annual Strategic Leadership Symposium (SLS) Feb. 12-14.

The symposium, which began in 1999 and is sponsored by the Chief of Navy Chaplains Office, is an opportunity for Chaplain Corps leadership to receive briefings on policy initiatives and programs for the three sea services.

"We frame policy influencing religious ministry based on the presentations and updates we get from our senior leaders," said Capt. Lorenzo York, special assistant to the chief of Navy chaplains for communications and community liaison.

"We're focusing on the mission and how we can maximize the resources of chaplains and religious program specialists to support the chief of naval operations' initiatives. This is a very significant year for us because senior chaplains will be wrestling with formulating a new

vision statement," said York.

Vice Adm. John G. Morgan, deputy chief of Naval Operations for Information, Plans and Strategy said he is looking forward to the results the symposium will bring.

"The collaboration between our Navy, Marine Corps and Coast Guard chaplain leadership is very good right now. The dialogue between leadership goes on every day. For my part, I can hardly wait to see the results I know are coming out of this incredible team effort. This SLS will give you an opportunity to join in the discussion and deliberations," said Morgan.

Topics discussed included strategic enterprise, globalization, homeland defense and the Chaplain Corps' role in supporting the war on terrorism. York explained that leadership will be able to return to their commands and share a clear picture of events in Washington.

Rear Adm. David H. Buss, chief of staff, Navy Enterprise, Office of Chief of Naval Operations, challenged the chaplaincy to develop a scientific methodology that will measure success of spiritual leadership.

"We ought to ask ourselves what can and should be measured. I think it's a healthy conversation to have be-

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USNH Okinawa on Cutting Edge with Surgical Scheduling

By Brian J. Davis, U.S. Naval Hospital Okinawa Public Affairs

OKINAWA, Japan - Operating room scheduling and administration at U.S. Naval Hospital (USNH) Okinawa will see a major boost in efficiency, thanks to a new software program expected to be online March 1.

The hospital is implementing the Surgery Scheduling System (S3), a web-based program originally developed for the Army. Offering a variety of benefits, S3 helps operating room staff streamline the surgical scheduling process, increases reporting accuracy and improves overall management efficiency.

The program already has been deployed to Army facilities worldwide and is in use at a handful of Naval hospitals. NH Okinawa is on track with the program's implementation and has already begun to

enjoy the benefits of S3.

"The program is installed, and training is underway with a fully operational 'go live' date of March 1," said Cmdr. Terry V. Bola, department head of operative care at USNH Okinawa.

According to Pamela Porch, S3 project director for the U.S. Army Medical Information Technology Center (USAMITC), the S3 program is cost effective and easy to use.

"The system is web-based and easily accessible on the hospital intranet. The intranet based feature also allows access to the program from any location in the hospital, including inside the actual operating rooms," said Porch.

Data entry and appointment scheduling can now be done in real time by the surgeons themselves, according to Capt. Susan Chittum, director of Surgical Services. Chittum explained the surgeon and the

patient can sit down in the doctor's office during a pre-operative appointment and schedule follow-on appointments together, rather than coordinate with another staff member assigned to maintain the operating room schedule.

The S3 system also ensures a greater degree of patient privacy.

"Access to the program will be limited to user accounts with different levels of permission, depending upon what the user's job assignment is," said Chittum.

The program can generate operating room schedule reports for the chain of command that omit sensitive patient information, keeping privacy-protected information on a strictly need-to-know basis, she added.

The S3 program was initially

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Bethesda continued...

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ple using the term "consolidation" to refer to integration. "Consolidation," the audience member said, sounds like a corporate take over.

"If you're worried about people using the term 'consolidation' over 'integration,' then I would say you should find a new word," Arthur said. "It doesn't matter what you call it, it is what it is -- it's an opportunity to come together. If you're looking for words to gain an advantage for one service or another, then that makes us lose sight of what we're trying to do."

"People are wondering whether we're going to wear Navy uniforms or Army uniforms, use the Army's fitness report or the Navy's, say 'Yes, sir!' or 'Aye, aye!'" Kiley said to laughs from audience. "But, the cultures will remain the same."

Kiley also briefly addressed several Washington Post articles which hit newsstands this week criticizing Walter Reed's care of injured troops. Kiley said there are not widespread problems at Walter Reed and added that the articles are not a reflection of Walter Reed and Bethesda staff members' dedication to the mission and genuine care for warfighters.

Addressing more integration-related topics, National Naval Medical Center Commander Rear Adm. Adam Robinson Jr. said he frequently hears about traffic and parking concerns. He said heavy traffic on Rockville Pike can be attributed to construction projects that have evolved in the Bethesda area over the past decade.

Despite that, Robinson said the hospital regularly

meets with local officials to address the issue and make patients' commutes as easy as possible. As for parking, Robinson detailed plans to open 2,000 to 2,400 more parking spaces on base, including a 12- to 15-story parking garage that will be mostly built underground.

Robinson said the parking is not only necessary for staff members, but patients will also need easy access to the hospital. He said estimates are the hospital's yearly outpatient appointments will grow from about 594,000 per year to just under 1 million. Robinson added that no construction will begin until 2008.

Attendees also had questions about staffing and troop levels. Kiley responded that the number of personnel who would staff each clinic or department hasn't been determined, nor has the final number of Walter Reed Soldiers and employees who would transition to Bethesda.

"For instance, Bethesda and Walter Reed both have virtual colonoscopy suites. How many more colonoscopy suites do we have to have and how many staff members do we need to run those?" Arthur asked. "We both have centers for corneal refractive surgery. So we're going to look at all of those product lines and we're going to staff to meet the needs of patient care."

Arthur and Kiley agreed the Army's and Navy's operational platforms would remain virtually untouched. They said Sailors wouldn't fill the Army's deployment needs and Soldiers wouldn't embark on a USNS Comfort deployment. They said special circumstances could change the deployment boundaries, but they expect those cases to be "extremely rare."

Navy Lab in Indonesia Serves on Front Line of Medical Research

By Jim Garamone, American Forces Press Service

JAKARTA, Indonesia - American and Indonesian personnel at U.S. Naval Medical Research Unit No. 2 aim to help protect U.S. service members deployed in tropical regions.

Seventeen Americans and 143 Indonesians serve on the research unit's staff. According to unit officials, the unit's mission is to conduct research and tests in tropical medical and infectious diseases to maintain and enhance the health, safety, and readiness of Navy and Marine Corps personnel in the performance of peacetime and contingency missions in Southeast Asia and other tropical and subtropical regions.

Lynne Pace, wife of Marine Gen. Peter Pace, chairman of the Joint Chiefs of Staff, toured the unit Feb. 13 and met with most of the researchers. Pace praised the dedication of the entire team, and said the American researchers have volun-

teered for multiple tours.

"They are here for two years, but almost all extend [their tours]," said Pace. "They know they are doing something important to benefit everybody."

The unit's scientists, doctors and technicians work with their Indonesian counterparts on researching malaria, dengue fever, the Hepatitis E virus, emerging infectious diseases and other health threats. A big part of their work lately has been research into avian influenza, or "bird flu." Indonesia's National Institute of Health Research and Development hosts the American facility, unit officials said.

The unit spends about \$5 million a year on salaries and goods from Indonesia, according to officials. Pace said that some of the equipment is purchased while other pieces of equipment are donated by U.S. and Indonesian charities and companies.

"The facilities are not what we are used to in the States," Pace said. "They do not have a big

budget, but they make the most out of what they get."

The unit is very much on the front lines of fighting disease. According to the U.S. Centers for Disease Control, Indonesia has the largest number of avian flu patients. Joint avian flu monitoring by the unit and their Indonesian counterparts will help to pinpoint any outbreaks of the disease or help stop H5N1 bird flu from crossing to humans, officials said.

The research unit has found that the problem in Indonesia isn't the commercial farms, Pace said, but the small farmers with chickens in the backyard. These families live with the birds and are most susceptible to contracting the disease.

The unit also has helped track hereditary factors in contracting SARS virus, and it continues to search for a malaria vaccine and studies drug-resistant parasites that cause malaria. In addition the research unit serves as a collecting point and a clearinghouse for information, officials said.

Chaplains continued...

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cause we may be surprised by the answers. A conversation with our customer -- and I have to word that as a conversation with our country -- is enterprise thinking because ultimately, at the end of the day, the American people are our customers," Buss said.

"What do our customers say? Are their religious needs and requirements being met and what is their degree of satisfaction? I think you can measure that," said Capt. Stephen Linehan, chaplain for the Marine Corps Base,

Kaneohe Hawaii.

He explained part of the symposium would be devoted to identifying those needs and articulating the participation of the Chaplain Corps in the sea services as they fit with the American maritime strategy of the future.

"Bringing insight, understanding and wisdom based on our religious strengths and traditions-- we can help shape and transform the focus," Linehan said.



MAGSAYSAY, Republic of the Philippines - Hospital Corpsman 3rd Class Nina Kovacs ensures aseptic conditions are maintained on dental equipment during the Medical Civic Action Program (MEDCAP) portion of Exercise Balikatan 2007. Kovacs, assigned to 3rd Medical Battalion, is participating in Balikatan, a regularly scheduled exercise focusing on interoperability of forces and humanitarian/civic assistance operations. *U.S. Navy photo by Mass Communication Specialist 2nd Class Johansen Laurel*

Corpsman Picks Up Top Bluejacket Honor After Iraq Tour

By Mass Communications Specialist
2nd Class Katherine Hofman, Reserve Readiness Command Southwest Public Affairs

ALAMEDA, Calif. - Reserve Readiness Command Southwest named Hospital Corpsman 3rd Class Aaron Ramirez its Bluejacket Sailor of the Year in late January for his actions while deployed to Iraq.

Ramirez served as a police training transition team line corpsman for 1st Battalion, 14th Marines, Regimental Combat Team 7 as part of a 13-man security patrol in Al-Anbar Province. He provided more than 700 health screenings for Iraqi police recruits and served as a vehicle commander in charge of navigational and vehicle operations during convoy missions in hostile environments.

While conducting recruiting operations for Iraqi police, Ramirez's convoy was struck by an improvised anti-tank mine. The corpsman quickly treated two injured Marines from his unit, staying with them until they could be evacuated. While waiting for help with the critically wounded Marines, a M2A2 Bradley Fighting Vehicle also was hit by an anti-tank mine some 30

meters away. Ramirez offered medical assessment and care to the Bradley crew even as he continued to monitor his original patients.

Ramirez takes such efforts in stride, and said he joined the Navy to be a role model for his son.

"I've had such a great experience," he added. "I give credit to the leadership that I have had. Because of it I now know what to look for in a good leader and I know how to be a good leader when I'm in that position."

"I have a lot of respect for Doc," said Marine Sgt. Victor Quinones, the noncommissioned officer in charge of Team 7 during Ramirez' deployment, using the affectionate nickname his Marines hung on their corpsman. "He was always alongside of us. When others had a hard day Doc would keep on going. Even though his main mission was to take care of the Marines, he didn't stop there. He always worked the patrol duties we were assigned to and took care of his corpsman duties on top of that. Whatever needed to be done, he did it."

Ramirez brings his civilian experience as an emergency medical technician and a field training officer to his duties at Navy Operational Support Center Alameda, and while not de-

ployed in support of the global war on terrorism, he has volunteered for funeral honor duty and provided medical support to the center's medical department.

He also has earned the respect of senior Sailors here.

Hospital Corpsman 1st Class (FMF) Janet La Salle, the center's medical department head, said if she were able to hand pick a team to go into a combat zone, she would have Ramirez at the top of her list.

"I know he would have my back," she said. "He's the corpsman I want to take care of me. His dedication to his job is unsurpassed."

Reserve Readiness Command Southwest numbers more than 10,000 reserve and active-duty Sailors throughout California, Arizona, Hawaii and Nevada with 21 operational support centers responsible for the coordination of more than 365 Navy Reserve units.

Got news, photos you would like to share with the rest of the Navy Medicine community? Email your stories and photos to camahoney@us.med.navy.mil

NH Okinawa continued...

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developed by an engineer at Tripler Army Medical Center in Hawaii to improve the overall efficiency of the operating room. The program was such a success that the Army Medical Department implemented it as the preferred tool for improving the management process of surgical scheduling.

Since the deployment of S3 at Naval Hospital Okinawa, the Navy's Bureau of Medicine and Surgery (BUMED) announced that the BUMED Information Technology (IT) Management Control Board selected S3 as the program of choice for the operating room management of surgical case scheduling for all Navy

hospitals.

The Air Force is also considering implementation of the program.

"The goal from the IT Management Control Board is to align the Navy with the Army and by getting rid of redundancy within both of the military medical arenas, have all the Navy using the same computer systems that are web-based and centrally managed," said Cmdr. Cynthia Turner, perioperative nursing program instructor at Naval Hospital Camp Pendleton.

Officials at NH Okinawa consider S3 another step forward in their continuous efforts to leveraging technology to improve patient care and operating efficiency.



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